STATE OF SOUTH DAKOTA
Statement of Legal Newspaper Ownership and Circulation

1. TITLE OF NEWSPAPER: Selby Record		2. DATE: 9-27-2024
3. FREQUENCY OF ISSUE: weekly	3A. NO. OF ISSUES PUBLISHED ANNUALLY: 52	3B. ANNUAL SUBSCRIPTION PRICE $ 39.00
4. COMPLETE MAILING ADDRESS OF KNOWN OFFICE OF PUBLICATION (Street, City, County, State and ZIP+4 Code) (Not printers): 4411 Main St., PO Box 421 Selby, SD 57472		
5. COMPLETE MAILING ADDRESS OF THE HEADQUARTERS OR GENERAL BUSINESS OFFICES OF THE PUBLISHER (Not printers): 4411 Main St., PO Box 421, Selby, SD 57472		
6. FULL NAME OF PUBLISHER: Karen Speidel		
7. OWNER (If owned by a corporation, its name and address must be stated and list on the back of this form the names and addresses of stockholders owning or holding 1 percent or more of total amount of stock. If not owned by a corporation, the names and addresses of the individual owners must be given. If owned by a partnership or other unincorporated firm, its name and address, as well as that of each individual must be given.		
FULL NAME: Karen Speidel	COMPLETE MAILING ADDRESS: 4407 Main St., PO Box 421 Selby, SD 57472	
8. KNOWN BONDHOLDERS, MORTGAGES, AND OTHER SECURITY HOLDERS OWNING OR HOLDING 1 PERCENT OR MORE OF TOTAL AMOUNT OF BONDS, MORTGAGES OR OTHER SECURITIES (If there are none, so state. If more space is needed, list on back of this form.: Todd Speidel, 4407 Main St., PO Box 421, Selby, SD 57472		

9. EXTENT AND NATURE OF CIRCULATION	AVERAGE NO. COPIES EACH ISSUED PRECEDING 12 MONTHS	ACTUAL NO. COPIES ISSUED NEAREST TO FILING DATE
A. TOTAL NO. COPIES (Net Press Run Plus Paid Electronic Copies)	950	950
B. PAID AND/OR REQUESTED CIRCULATION		
1. Sales through dealers and carriers, street vendors, and counter sales.	230	230
2. Mail Subscription (Paid and or requested)	652	625
3. Paid Electronic Copies	0	0
C. TOTAL PAID AND/OR REQUESTED CIRCULATION (Sum of 9B1, 9B2 and 9B3.)	882	855
D. FREE DISTRIBUTION		
1. BY MAIL, CARRIER OR OTHER MEANS	4	4
2. SAMPLES, COMPLIMENTARY AND OTHER FREE COPIES	0	0
E. TOTAL DISTRIBUTION (Sum of C, D1 and D2)	886	859
F. COPIES NOT DISTRIBUTED		
1. Office use, left over, unaccounted, spoiled after printing	64	91
2. Return from News Agents	0	0
G. TOTAL (Sum of E, F1 and F2 – Should equal total shown in A.)	950	950

Statement must be signed by Publisher, Business Manager, or Owner in the presence of a Notary Public

I swear that the statements made by me are true, correct, and complete:

Karen Speidel
(Signature)

Publisher / Owner
(Title)

State of South Dakota)
§
County of Walworth)

Sworn to before me this 27 day of Sept, 2024

Linda Gill
Notary Public

My commission expires: Linda Gill My Commission Expires March 8, 2029

(Seal)

LINDA GILL
NOTARY PUBLIC
SOUTH DAKOTA
SEAL SEAL

Form: SOS REC 051 9/2016